

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		8-19-99
O.I.P.E. CLASSIFIER		18	8/24/99
FORMALITY REVIEW		21098	8/31/99

INDEX OF CLAIMS

+ - = & ..... Rejected      N ..... Non-elected  
 (Through numeral)... Allowed      I ..... Interference  
 ..... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		3/21/01	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions, staple additional sheet here

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